



PARTNER AGREEMENT

Date: _____

Partner Name: _____ Phone: _____

Address: _____

City: _____ State: _____ Zip: _____

Company Website: _____ Email: _____

Contact name: _____ Phone: _____

Please check applicable statement:

- Returning Partner
- New Partner

Level of partnership chosen _____

Amount of check or value of goods donated towards sponsor partnership _____

Partners to receive all benefits as published on the UHSRA web site at the time of signing the Partnership agreement as they pertain to that level of partnership.

Please list any or all discounts available through your sponsorship to the members of the

UHSRA that we can publish on the UHSRA web site _____

Partnership to be for a term of twelve months from the time the agreement is received in the UHSRA Rodeo office. Please send all agreements and payment to the Attention of UHSRA C/O: Joni Haderlie 881 Little Hobble Creek Rd Wallsburg, Utah 84082.

If your partnership level entitles you a booth space at the State Finals Rodeo then the partner and the UHSRA agree to incorporate the UHSRA vendor agreement to be part of this contract along with all the governing rules for vendors including required signatures to the additional trade show agreement.

Use the space below for any additional terms, comments or explanations you wish to make:

UHSRA Representative serving you: _____

Phone: _____ **Email:** _____

PARTNER SIGNATURE: _____

PRINT: _____

OFFICIAL USE ONLY

TOTAL AMOUNT RECEIVED: _____ **CHECK #** _____

UHSRA REPRESENTATIVE _____ **DATE** _____